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ABSTRACT

In June 1972, the Research Medical Center School of Nursing was awarded a Capitation Grant for approximately $66,000 under the Nurse Training Act of 1971. This report focuses on one of three projects delineated under this grant: Training for new roles, types, or levels of nursing personnel. The purpose of the project was to gather data relative to the post-graduation vocational and educational activities and future plans of the graduates for the five years 1968-1972. Part 1 of the study outlines the results of a questionnaire sent to the graduates as well as input obtained from the school's director and the Medical Center's assistant director for Patient Services. Part 2 of the study reviews the responses obtained to determine potential implications for the curriculum and to formulate recommendations based upon comments made by the graduates. The questionnaire contained a list of 22 nursing functions and two open-ended questions. The ratings of the nursing functions and responses to the open-ended questions provided the information for the recommendations. (JMF)

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ED112738

Nursing Capitation Grant Project B
Training for New Roles, Types, or Levels of Nursing Personnel

A FOLLOW-UP STUDY OF THE CLASSES OF 1968-1972

GRANT NO. 1E04 NU00714-01

HE 006 714

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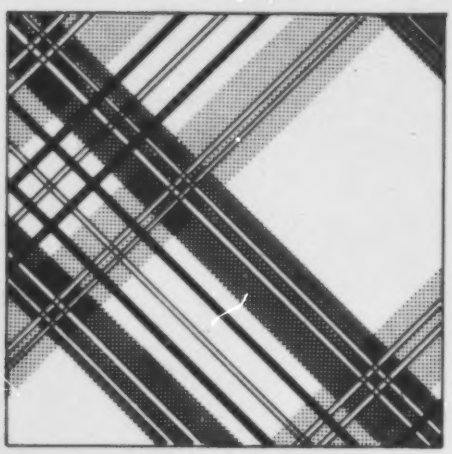

Research
Medical Center
School of Nursing
2316 E. Meyer Boulevard
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Nursing Capitation Grant Project B
Training for New Roles, Types, or Levels of Nursing Personnel

A FOLLOW-UP STUDY OF THE CLASSES OF 1968-1972

GRANT NO. 1E04 NU00714-01

PREFACE

This study of Research Medical Center School of Nursing graduates was one of three projects undertaken as part of the Nursing Capitation Grant #1E 04 NU00714-01 awarded the School of Nursing.

The purpose of these projects is to provide information to aid in improving the quality of education offered by the School of Nursing and to provide a data base for future studies.

The projects are being conducted by the School of Nursing. The project staff includes Dr. Teresa L. Mitchell, Project Director; Clifford B. Tatham, Coordinator, Special Grants and Projects; and Mary H. Proctor. Members of the Medical Center's Administration and the School's Faculty who provided information for the Follow-up Study included: Carl Felling, Assistant Director, Patient Services; Marie Barrentine, Linda Harris, Evalyn Holder, Pam McNally and Joan Walker.

This report describes the procedures and findings of the Follow-up Study of the Classes of 1968 through 1972 of the School of Nursing. Additional information may be obtained by contacting Mr. Tatham.

Teresa L. Mitchell, R.N., Ph.D.
Director
School of Nursing

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A FOLLOW-UP STUDY OF THE CLASSES OF 1968-1972: PART I

In June, 1972 the Research Medical Center School of Nursing was awarded a Capitation Grant for approximately $66,000 under the Nurse Training Act of 1971 (Grant #1E 04 NU00714-01). Three projects were delineated under this grant: "Training for New Roles, Types, or Levels of Nursing Personnel"; "Curriculum Improvement"; and "Increasing the Supply of Nursing Personnel". This report focuses upon Part I of the "Training for New Roles..." project.

PURPOSE. The purpose of this project was to gather data relative to the post-graduation vocational and educational activities and future plans of the graduates of Research Medical Center School of Nursing for the past five years (1968-1972). The information gathered for this report will provide the basis for Part II of this project, that is, to evaluate the findings of this report to determine if the curriculum could be enhanced.

METHODOLOGY. An ad hoc committee of the School's faculty was formed to advise the research staff in the development of a questionnaire to be mailed to the graduates of the School. Additional input was obtained from the School's Director and the Medical Center's Assistant Director for Patient Services.

The population for this study consisted of those students who had graduated from the School during the years 1968

through 1972. Due to the relatively small size of the population, it was decided to mail the questionnaires to all graduates rather than a random sample of each class. Addresses were available for 286 of the 296 graduates.

A letter explaining the purpose of the study and a copy of the questionnaire were mailed to those graduates for whom addresses were available. Approximately three weeks after the initial mailing, a second letter and another copy of the questionnaire were mailed to those graduates who had not responded to the first letter. During the early part of August telephone calls were made to those graduates living in the Kansas City area who had not returned their questionnaire. These graduates were asked for their cooperation in the project. A copy of the letters and the questionnaire may be found in the Appendix.

SURVEY FINDINGS. Completed questionnaires were returned from 234 of the 286 graduates for an overall return rate of eighty-two percent (82%). The return rate varied from seventy-nine percent (79%) for the Class of 1970 to eighty-four percent (84%) for the Classes of 1969 and 1972. The data appear in tabular form at the conclusion of the narrative.

SUMMARY. The major findings of this Follow-up Study were as follows:

1. Seventy-one percent (71%) of the graduates who responded indicated that they were married. As might be expected, the proportion of married respondents increased the longer they had been out of school.

2. Two-thirds of the group (66%) indicated that they

resided within the six-county metropolitan Kansas City area. Eight-two percent (82%) of those who reside in the metropolitan area are employed by hospitals in the area.

3. All of the respondents have been employed at least one time since their graduation. A total of 90% indicated that they were employed either full time (76%) or part time (14%). The major reason cited for not being employed was family/personal needs.

4. The respondents are licensed as Registered Nurses in 27 states including Missouri. Sixty-five percent (65%) are licensed in Missouri only and twenty-nine percent (29%) are licensed in Missouri and at least one other state. The remaining 6% are licensed in other states.

5. The number of nursing positions held since graduation tends to increase with the length of time since graduation. For the group as a whole, 45% have been with the same employer since graduation. The approximate median monthly salary for this group was $750.

6. Of those who indicated they were employed as RNs, approximately 13% were working in each of the following nursing fields: Medical, Surgical, Pediatrics, and Maternity. An additional 26% were working in Special Services, e.g. Intensive Care Units, Emergency Room, etc., and 6% were in general nursing.

7. Eighty-three percent (83%) indicated they were employed by a hospital; 71% of these are employed by hospitals in the metropolitan Kansas City area. An additional 9% were employed in doctors' offices.

8. Approximately seventy percent held positions as either Staff Nurses (31%) or as Team Leaders (40%). Another 10% indicated they were either Head Nurses (8%) or Supervisors (2%).

9. Slightly over one-half (59%) of the group has been continuously employed since graduation. For those who indicated their employment had been interrupted, 82% were unemployed for less than one year.

10. A majority of the respondents indicated that they hoped to still be active in the nursing profession in 1983. In rank order, the three most frequently cited positions they hoped to have were: Staff Nurse, Administrative, and Instructor. Although not all respondents answered this particular question, of those who did several listed two or more

positions. Only 17 indicated they were undecided about proceeding, or staying in, nursing.

11. Thirty-six percent (36%) of the respondents are members of one or more professional organizations, e.g. National League for Nursing, American Nurses Association, etc. One-fifth (20%) indicated that they were members of the Alumni Association. One third (33%) indicated they had been active in the Student Nurse council while in school.

12. Ten percent (10%) of the group had contributed a total of 500 hours in volunteer services to agencies such as the Red Cross, during the past year. Twenty percent (20%) had given talks or participated in panel discussions related to the health field an average of 2.2 times during the past year.

13. Over one-half (59%) of the group had investigated the possibility of obtaining a Baccalaureate Degree. Of those who investigated a Baccalaureate program, 25% applied for admission and 94% of the applicants were accepted.

14. Three graduates have attained their Baccalaureate Degrees in Nursing since graduating. An additional 16 indicated they were attending a program which would lead to a degree; six in Nursing and 10 in other fields.

15. The majority of the respondents (84%) indicated that they had encountered no difficulty in obtaining a position because they lacked the Baccalaureate Degree.

16. Over one-third (38%) indicated they had attended workshops, institutes, or non-credit courses since graduation. Of those who had attended such programs, 60% had attended one, 28% had attended two, and 12% had attended three or more.

17. Based upon their education at the School of Nursing, a majority of the graduates felt they were qualified to be either a Hospital Staff Nurse (96%) or a Team Leader (85%). In addition, 81% felt qualified to function in a Clinic/Doctor's office.

18. With experience, but without further education, 68% of the graduates felt they would be qualified to be Head Nurses and 38% to be Supervisors. One-fourth (25%) felt they would be qualified to be either a Clinical or Classroom Instructor and 28% to be Public Health Nurses.

19. Slightly over one-half (58%) of the respondents rated their preparation for nursing in general as 'Somewhat above' that of graduates of other Diploma programs. An additional 39% rated their preparation as 'About the same' as that of graduates of other Diploma programs. Eighty-eight percent (88%) rated their preparation as 'Somewhat above' that of graduates of Associate Degree programs. When compared to the preparation of a Baccalaureate Degree Nurse, 44% of the respondents rated their preparation as 'Somewhat above' and 44% as 'About the same' as that of a Baccalaureate Degree Nurse.

20. Overall, 29% rated the adequacy of their preparation as 'Excellent', 51% rated it as 'Good' and 16% rated it as 'Fair'. The majority of the respondents indicated that their work in nursing had met their expectations in terms of Personal Satisfaction (89%), Salary (71%) and Working Conditions (66%).

21. Ninety-two percent (92%) of the respondents Agreed or Strongly Agreed that the Diploma Programs in Nursing should be continued. The most frequently cited reasons for continuing the Diploma Program were: "Better preparation" and "More clinical experience" than graduates of other nursing programs.

Table 1

Rate of Return of Questionnaire
by Year of Graduation

	1968		1969		1970		1971		1972		Total	
Questionnaire	N	%	N	%	N	%	N	%	N	%	N	%
Returned	29	80.6	27	84.4	49	79.0	54	80.6	75	84.3	234	81.8
Not Returned	7	19.4	5	15.6	13	21.0	13	19.4	14	15.7	52	18.2
Total	36	100.0	32	100.0	62	100.0	67	100.0	89	100.0	286	100.0

Table 2

Marital Status of Respondents

	1968 (N=29)	1969 (N=27)	1970 (N=49)	1971 (N=54)	1972 (N=75)	Total (N=234)
Marital Status						
Single	18.5%	11.1%	14.3%	29.6%	40.0%	26.1%
Married	74.1	85.2	85.7	66.7	57.3	70.9
Formerly Married	7.4	3.7	0.0	3.7	2.7	2.9
Total	100.0	100.0	100.0	100.0	100.0	100.0

Table 3

Number of Children of Married and Formerly Married Respondents

	1968 (N=24)	1969 (N=24)	1970 (N=42)	1971 (N=38)	1972 (N=45)	Total (N=173)
Number of Children						
None	45.8%	29.2%	45.2%	63.2%	68.9%	53.2%
1	25.0	54.2	33.3	23.7	11.1	27.2
2	16.7	8.3	19.1	2.6	8.9	10.9
3	4.2	8.3	2.4	0.0	2.2	2.9
No Response	8.3	0.0	0.0	10.5	8.9	5.8
Total	100.0	100.0	100.0	100.0	100.0	100.0

Table 4

Occupations of Respondents' Spouses

	1968 (N=22)	1969 (N=23)	1970 (N=42)	1971 (N=36)	1972 (N=43)	Total (N=166)
Occupation						
Professional Physician	9.1%	0.0%	0.0%	0.0%	2.3%	1.8%
Health related	13.6	8.7	7.1	2.8	4.6	6.6
Business	4.5	4.3	9.5	16.7	7.0	9.0
Education	0.0	8.7	2.4	5.6	4.6	4.2
Engineering	9.1	4.3	7.1	5.6	4.6	6.0
Natural sciences	4.5	0.0	4.8	2.8	2.3	3.0
Pharmacology	4.5	0.0	2.4	0.0	0.0	1.2
Others	4.5	4.3	7.1	8.3	2.3	5.4
Armed Forces	4.5	8.7	14.3	8.3	7.0	9.4
Managerial	9.1	8.7	2.4	2.8	4.6	4.8
Sales/Clerical	9.1	30.4	11.9	8.3	11.6	13.2
Skilled	4.5	13.0	19.0	13.9	11.6	13.2
Agriculture	0.0	0.0	0.0	2.8	2.3	1.2
Law enforcement	0.0	0.0	0.0	2.8	7.0	2.4
Student	9.1	0.0	7.1	16.7	16.3	10.8
Housewife	0.0	0.0	0.0	0.0	2.3	.6
Other	4.5	4.3	0.0	0.0	2.3	1.8
No response	9.1	4.3	4.8	2.8	7.0	7.4
Total	100.0	100.0	100.0	100.0	100.0	100.0

Table 5

Educational Level of Respondents' Spouses

	1968 (N=22)	1969 (N=32)	1970 (N=42)	1971 (N=36)	1972 (N=43)	Total (N=166)
Years of Education						
8-11	0.0%	8.7%	0.0%	0.0%	0.0%	1.2%
12	13.6	13.0	9.5	2.8	16.7	10.2
13	0.0	17.4	16.7	19.4	4.8	12.0
14	0.0	21.7	21.4	13.9	14.3	15.1
15	13.6	4.4	7.1	11.1	9.5	9.0
16	22.7	13.0	26.2	25.0	33.3	25.3
Over 16	40.9	21.7	19.1	27.8	21.4	24.7
No Response	2.9	0.0	0.0	0.0	0.0	2.4
Total	100.0	100.0	100.0	100.0	100.0	100.0

Table 6

State in Which Respondents are Licensed as R. N.s

	1968 (N=29)	1969 (N=27)	1970 (N=49)	1971 (N=54)	1972 (N=75)	Total (N=234)
Licensed in:						
Missouri Only	58.6%	66.7%	53.1%	62.9%	76.0%	64.9%
Missouri Plus*	34.5	14.8	34.7	35.2	24.0	28.6
Other States**	6.9	18.5	12.2	1.8	0.0	5.9
Total	100.0	100.0	100.0	100.0	100.01	100.0

* Mississippi, Kansas, Colorado, Nebraska, Iowa, California, Texas, Wisconsin, Connecticut, Indiana, Delaware, Alabama, Minnesota, New Mexico, Maine, Massachusetts, Michigan, Ohio, Florida, Illinois, Maryland, Oklahoma, Washington & Guam

** Louisiana, Pennsylvania, Idaho, Arizona, Colorado & Kansas

Table 7

Respondents Presently Working as R. N.s

	1968 (N=29)	1969 (N=27)	1970 (N=49)	1971 (N=54)	1972 (N=75)	Total (N=234)
Length of time per week						
Full time	51.7%	59.3%	59.2%	88.9%	91.8%	76.1%
Part-time 1-16 hours	24.1	7.4	8.2	3.7	0.0	6.4
17-32 hours	3.5	14.8	18.4	0.0	5.4	7.7
33 or more	3.5	0.0	0.0	0.0	0.0	.8
Not working	10.3	18.5	14.3	7.4	2.7	8.6
No response	6.9	0.0	0.0	0.0	0.0	.8
Total	100.0	100.0	100.0	100.0	100.0	100.0

Table 8

Primary Reasons for Not Working as an R. N.

	1968 (N=4)	1969 (N=5)	1970 (N=7)	1971 (N=4)	1972 (N=2)	Total (N=22)
Reason Given						
Family/personal	50.0%	80.0%	71.4%	100.0%	50.0%	72.7%
Not necessary	25.0	0.0	28.6	0.0	0.0	13.6
No desirable positions	0.0	0.0	0.0	0.0	50.0	4.6
Other	25.0	20.0	0.0	0.0	0.0	9.1
Total	100.0	100.0	100.0	100.0	100.0	100.0

Table 9

Field in which Respondents are Now Employed

	1968 (N=24)	1969 (N=23)	1970 (N=42)	1971 (N=50)	1972 (N=73)	Total (N=212)
Nursing Field						
Medical	4.2%	8.8%	19.0%	8.0%	20.5%	16.5%
Surgical	20.8	17.4	7.2	12.0	10.9	12.3
Maternity	29.2	8.7	16.7	12.0	16.4	16.0
Pediatric	12.5	8.7	4.8	20.0	12.3	12.3
Psychiatric	0.0	0.0	0.0	4.0	2.7	1.9
Special Services	16.7	21.7	28.6	10.0	23.3	20.3
Other	16.7	34.8	23.8	24.0	13.7	20.8
Total	100.0	100.0	100.0	100.0	100.0	100.0

Table 10

Type of Employer for whom Respondents Work

	1968 (N=24)	1969 (N=23)	1970 (N=42)	1971 (N=50)	1972 (N=73)	Total (N=212)
Employer						
Hospital	79.2%	82.6%	80.9%	86.0%	84.9%	83.4%
Nursing Home	0.0	0.0	0.0	0.0	1.4	.4
Public Health	0.0	0.0	2.4	0.0	1.4	.8
School of Nursing	0.0	0.0	2.4	0.0	0.0	.4
M.D., D.D.S., etc.	16.7	8.7	11.9	4.0	8.2	9.0
Other	4.2	8.7	2.4	10.0	4.1	4.6
Total	100.0	100.0	100.0	100.0	100.0	100.0

Table 11

Type of Nursing Position Held by Respondents

	1968 (N=24)	1969 (N=23)	1970 (N=42)	1971 (N=50)	1972 (N=73)	Total (N=212)
Position						
Staff Nurse	12.5%	30.4%	23.8%	36.0%	39.7%	31.6%
Team Leader	58.3	26.1	38.1	32.0	43.8	39.5
Head Nurse	4.2	4.4	9.5	12.0	8.2	8.5
Supervisor	0.0	4.4	7.1	2.0	0.0	2.4
Instructor	4.2	4.4	2.4	4.0	0.0	1.9
Private Duty	0.0	0.0	0.0	0.0	1.4	.5
Other	20.4	30.4	19.1	14.0	6.8	14.7
No Response	8.4	0.0	0.0	0.0	0.0	.8
Total	100.0	100.0	100.0	100.0	100.0	100.0

Table 12

Number of Nursing Positions Held Since Graduation

	1968 (N=29)	1969 (N=27)	1970 (N=49)	1971 (N=54)	1972 (N=75)	Total (N=234)
Number of Positions						
1	20.7%	37.0%	32.6%	53.7%	60.0%	45.3%
2	6.9	11.1	32.6	20.4	29.3	23.1
3	24.1	29.6	26.5	24.1	9.3	20.5
4	20.7	11.1	8.2	1.8	0.0	5.9
5 or more	17.2	11.1	0.0	0.0	0.0	3.4
No Response	10.3	0.0	0.0	0.0	1.3	1.7
Total	100.0	100.0	100.0	100.0	100.0	100.0

Table 13

Number of Promotions Within One Institution

	1968 (N=29)	1969 (N=27)	1970 (N=49)	1971 (N=54)	1972 (N=75)	Total (N=234)
Promotions						
One	24.1%	26.0%	14.3%	27.8%	18.7%	21.4%
Two	13.8	18.5	16.3	13.0	5.3	12.0
Three	6.9	3.7	6.1	3.7	0.0	3.4
Four or more	6.9	3.7	0.0	0.0	0.0	1.3
No Response	48.3	48.2	63.3	55.6	76.0	62.1
Total	100.0	100.0	100.0	100.0	100.0	100.0

Table 14

Approximate Monthly Salary Before Deductions

	1968 (N=29)	1969 (N=27)	1970 (N=49)	1971 (N=54)	1972 (N=75)	Total (N234)
Monthly Salary						
$500 or less	10.3%	11.1%	14.3%	11.1%	4.0%	9.8%
$501-600	0.0	3.7	14.3	12.9	10.7	9.8
$601-700	10.3	11.1	20.4	22.2	41.3	25.2
$701-800	34.5	48.2	26.5	44.4	30.7	35.5
$801-900	17.2	14.8	10.2	3.7	10.7	10.3
$901 or more	10.3	3.7	4.1	0.0	0.0	2.6
No Response	17.2	7.4	10.2	5.6	2.7	6.8
Total	100.0	100.0	100.0	100.0	100.0	100.0

Table 15

Length of Time Respondents Unemployed as R. N.s

	1968 (N=16)	1969 (N=16)	1970 (N=20)	1971 (N=16)	1972 (N=22)	Total (N=90)
Length of Time						
Less than 5 months	43.7%	31.5%	45.0%	81.3%	86.4%	58.9%
5 months-1 year	25.0	50.0	30.0	0.0	13.6	23.2
1-2 years	6.2	18.8	20.0	18.8	0.0	12.2
2-3 years	6.2	0.0	5.0	0.0	0.0	2.2
3-4 years	6.2	0.0	0.0	0.0	0.0	1.1
More than 4 years	6.2	0.0	0.0	0.0	0.0	1.1
Total	100.0	100.0	100.0	100.0	100.0	100.0

Table 16

Types of Positions Respondents Hope to Have 10 Years From Now*

	1968	1969	1970	1971	1972	Total
Position						
Staff RN**	11	10	20	18	20	79
Administrative***	4	6	7	17	15	49
Instructor	3	2	6	8	6	25
M. D.'s Office	0	2	2	0	4	8
School Nurse	1	1	1	1	4	8
Anesthetist	1	0	1	1	2	5
Further Education	1	0	2	0	1	4
Public Health Nurse	0	2	1	0	0	3
Industrial Nurse	0	0	0	0	1	1
Non-nursing/Undecided****	6	2	5	3	1	17

*Several respondents listed two or more positions.
**Includes Full or Part-time RNs and Charge Nurses.
***Includes Supervisor, Researcher, Consultant and Head Nurse
****Includes Housewife, Outside Nursing Field, and None.

Table 17

Organizations Related to Health Field to Which Respondents Belong*

	1968	1969	1970	1971	1972	Total
Organization*						
National League for Nursing	2	0	1	1	3	7
American Nurses Assoc	3	1	3	3	6	16
RHMC Alumni Assoc	11	10	7	8	12	48
Assoc of O.R. Nurses	3	7	2	2	3	17
Emergency Room Nurses Assoc	1	0	0	2	4	7
Critical Care Nurses Assoc	2	0	2	2	10	16
MO. State Nurses Assoc	0	0	1	0	2	3
Assoc of OB Nurses	1	0	1	1	2	5
Other	7	1	2	3	0	13

* Several respondents belong to two or more organizations

Table 18

Percentage of Respondents Active in Student Nurse Council

	1968 (N=29)	1969 (N=27)	1970 (N=49)	1971 (N=54)	1972 (N=75)	Total (N=234)
Active						
Yes	44.8%	48.2%	38.8%	9.3%	22.7%	32.9%
No	44.8	51.8	59.2	90.7	74.7	64.1
No Response	10.3	0.0	0.0	0.0	2.7	3.0
Total	100.0	100.0	100.0	100.0	100.0	100.0

Table 19

Health-Related Volunteer Activities
Respondents Engaged in Since Graduation*

	1968 (N=29)	1969 (N=27)	1970 (N=49)	1971 (N=54)	1972 (N=75)	Total (N=234)
Red Cross, etc.						
Yes	13.8%	11.1%	12.2%	9.3%	6.7%	9.8%
No	72.4	99.9	87.8	90.7	89.3	87.6
No Response	13.8	0.0	0.0	0.0	4.0	2.5
Total	100.0	100.0	100.0	100.0	100.0	100.0
Number of hours contributed	56	188	36	91	129	500
Community Activities						
One	20.7%	11.1%	4.1%	5.6%	1.3%	6.4%
Two	6.9	3.7	4.1	0.0	0.0	2.1
Three	0.0	3.7	0.0	0.0	0.0	.4
No Response	72.4	81.5	91.8	94.4	98.7	85.9
Total	100.0	100.0	100.0	100.0	100.0	100.0
Talks or Panels						
One	17.2%	7.4%	10.2%	9.3%	4.0%	8.1%
Two	6.9	0.0	4.1	5.6	10.7	6.4
Three	6.9	7.4	2.0	0.0	0.0	2.1
Four or more	0.0	14.6	2.0	1.8	1.3	3.4
None/No Response	69.0	33.3	81.6	81.5	85.3	79.5
Total	100.0	100.0	100.0	100.0	100.0	100.0

*Two respondents have written articles for publication

Table 20

Respondents Investigating, Applying For, and Accepted To Institutions for Continuing Higher Education

	1968 (N=29)	1969 (N=27)	1970 (N=49)	1971 (N=54)	1972 (N=75)	Total (N=234)
Investigated						
Yes	62.7%	63.0%	55.1%	53.7%	64.0%	59.4%
No	31.3	37.0	42.9	44.4	34.7	38.5
No Response	6.9	0.0	2.0	1.8	1.3	2.1
Total	100.0	100.0	100.0	100.0	100.0	100.0
Applied						
Yes	27.6%	3.7%	22.4%	11.1%	12.0%	15.0%
No	37.9	59.3	32.6	46.3	48.0	44.4
No Response	34.4	37.0	44.9	42.6	40.0	40.6
Total	100.0	100.0	100.0	100.0	100.0	100.0
Accepted	(N=8)	(N=1)	(N=11)	(N=6)	(N=9)	(N=35)
Yes	100.0%	100.0%	81.8	100.0%	88.9%	94.3%
No	0.0	0.0	18.2	0.0	0.0	5.7
No Response	0.0	0.0	0.0	0.0	11.1	2.8
Total	100.0	100.0	100.0	100.0	100.0	100.0

Table 21

How Credit for Diploma Program Given to Accepted Respondents

	1968 (N=8)	1969 (N=1)	1970 (N=9)	1971 (N=6)	1972 (N=8)	Total (N=32)
Credit Applied						
Blanket credit	50.0%	0.0%	44.4%	0.0%	37.5%	34.4%
Testing out	37.5	0.0	44.4	16.7	12.5	28.1
Both of Above	0.0	100.0	11.1	33.3	12.5	28.1
Other	0.0	0.0	0.0	16.7	0.0	3.1
None given	0.0	0.0	0.0	16.7	12.5	12.5
No Response	12.5	0.0	0.0	16.7	25.0	12.5
Total	100.0	100.0	100.0	100.0	100.0	100.0

Table 22

Respondents Who Have Attended Baccalaureate Programs

	1968 (N=29)	1969 (N=27)	1970 (N=49)	1971 (N=54)	1972 (N=75)	Total (N234)
Attended						
Yes	37.9%	11.1%	24.5%	11.1%	16.0%	18.8%
No	51.7	81.5	73.5	87.0	73.3	74.8
No Response	10.3	7.4	2.0	1.8	10.7	6.4
Total	100.0	100.0	100.0	100.0	100.0	100.0
Received Degree	(N=11)	(N=3)	(N=12)	(N=7)	(N=16)	(N=49)
Yes	45.4%	0.0%	16.7%	14.3%	12.5%	20.4
No	27.3	66.7	33.3	14.3	43.7	34.7
Now Attending	18.2	33.3	33.3	57.1	31.2	32.6
No Response	9.1	0.0	16.7	14.3	12.5	12.2
Total	100.0	100.0	100.0	100.0	100.0	100.0

Table 23

Difficulty in Obtaining a Position
Due to Lack of Baccalaureate Degree

	1968 (N=29)	1969 (N=27)	1970 (N=49)	1971 (N=54)	1972 (N=75)	Total (N=234)
Experienced difficulty						
Yes	6.9%	7.4%	10.2%	11.1%	0.0%	6.4%
No	69.0	88.9	83.7	81.5	90.7	84.2
No Response	42.1	3.7	6.1	7.4	9.3	9.4
Total	100.0	100.0	100.0	100.0	100.0	100.0

Table 24

Workshops, Institutes, and Non-Credit
Courses Attended by Respondents

	1968 (N=29)	1969 (N=27)	1970 (N=49)	1971 (N=54)	1972 (N=75)	Total (N=234)
Number attended						
One	13.8%	14.8%	32.6%	22.2%	22.7%	22.6%
Two	10.3	11.1	12.2	16.7	5.3	10.7
Three or more	6.9	7.4	2.0	5.6	0.0	4.7
No Response	68.8	66.7	53.1	55.5	72.0	62.0
Total	100.0	100.0	100.0	100.0	100.0	100.0

Table 25

Positions Respondents Felt Qualified to Take After Graduation*

	1968	1969	1970	1971	1972	Total
Positions						
Staff Nurse	25	26	47	54	72	224
Head Nurse	1	1	2	1	2	7
Team Leader	23	25	40	46	66	200
Public Health	3	4	3	8	15	33
Instructor	8	2	2	1	3	9
Supervisor	0	0	0	1	1	2
M. D.s office	23	21	42	42	61	189
Other	3	3	6	2	4	18

*Respondents indicated two or more positions.

Table 26

Positions Respondents Felt Qualified to Take After Graduation but Without Further Educational Preparation*

	1968	1969	1970	1971	1972	Total
Positions						
Staff Nurse	11	5	1	31	1	51
Head Nurse	20	22	32	40	44	158
Team Leader	3	2	8	5	7	25
Public Health	3	9	20	15	18	65
Instructor	8	11	10	12	17	58
Supervisor	14	15	20	15	26	90
M. D.s office	4	3	5	6	5	23
Other	5	5	0	2	1	13

*Respondents indicated two or more positions.

Table 27

Rating of General Preparation Compared to Graduates of Other Programs

	1968 (N=29)	1969 (N=27)	1970 (N=49)	1971 (N=54)	1972 (N=75)	Total (N=234)
Other Diploma Programs						
Somewhat above	58.6%	55.6%	59.2%	55.6%	58.7%	57.7%
About the same	31.0	40.7	40.8	42.6	37.3	38.9
Somewhat below	3.4	0.0	0.0	1.8	2.7	1.7
No Response	6.9	3.7	0.0	0.0	1.3	1.7
Total	100.0	100.0	100.0	100.0	100.0	100.0
Associate Degree Programs						
Somewhat above	93.1%	92.6%	87.8%	88.9%	84.0%	88.0%
About the same	0.0	0.0	8.2	7.4	9.3	6.4
Somewhat below	0.0	0.0	2.0	0.0	0.0	.4
No Response	6.9	7.4	2.0	3.7	6.7	3.8
Total	100.0	100.0	100.0	100.0	100.0	100.0
Baccalaureate Programs						
Somewhat above	48.3%	51.8%	40.8%	38.9%	44.0%	43.6%
About the same	41.4	40.7	48.9	48.2	41.3	44.4
Somewhat below	3.4	0.0	8.2	11.1	10.7	8.1
No Response	6.9	7.4	2.0	1.8	4.0	3.8
Total	100.0	100.0	100.0	100.0	100.0	100.0

Table 28

Average Ratings of Adequacy of Preparation for Nursing Functions

Function	Excel.	Good	Fair	Poor	No Resp.
Determining nursing needs at various points on the health-illness continuum	38.0%	56.8%	3.4%	.4%	1.3%
Determining nursing needs of various ages	36.0	53.4	8.1	.4	2.1
Planning nursing care	45.3	47.9	5.6	.4	1.7
Implementing nursing care plan	43.6	43.6	11.5	0.0	1.3
Evaluating nursing care given by self or others	29.5	56.8	9.4	1.3	3.0
Utilizing technical skills in nursing procedures	44.9	47.9	5.6	.4	1.3
Recognizing and meeting psychological needs	28.2	47.9	20.9	1.7	1.3
Patient and family teaching	32.1	46.2	26.9	1.7	2.1
Observe, record, report important signs and symptoms	48.3	46.6	3.8	0.0	1.3
Decisions regarding nursing care based on scientific principles	23.5	64.1	10.3	0.0	2.1
Communicating effectively: with patients and families	33.3	50.4	14.5	.4	1.3
with Health Team members	32.9	52.6	10.7	1.7	2.1
with Supervisor	23.1	44.0	25.6	4.7	2.6
with Doctors	19.2	48.3	26.9	3.0	2.6
Participating in analysis, meeting of total health needs of patients	17.9	59.8	19.2	1.7	1.3

Table 28
(continued)

Function	Excel.	Good	Fair	Poor	No Resp.
Assisting patient with regimen for treatment	24.4%	61.1%	12.8%	0.0%	1.7%
Coordinating work and guiding team members	22.6	54.7	20.1	.8	1.7
Working effectively with others	38.0	52.6	6.0	1.3	2.1
Using educational opportunities for professional, personal growth	10.7	50.4	32.0	5.1	1.7
Responsibility for decisions and actions as professionals	34.2	50.4	12.0	1.7	1.7
Using community resources to coordinate long-term patient care	6.8	30.3	49.2	12.0	1.7
Developing individual philosophy of nursing	26.1	56.4	14.1	1.7	1.7
Average rating	29.5	51.0	15.8	1.8	1.8

Table 29

Percentage of Respondents Whose Work in Nursing has Met Their Expectations

	1968 (N=29)	1969 (N=27)	1970 (N=49)	1971 (N=54)	1972 (N=75)	Total (N=234)
Personal Satisfaction						
Yes	89.7%	81.5%	91.8%	96.3%	86.7%	89.3%
No	0.0	14.8	8.2	3.7	13.3	9.0
No Response	10.3	3.7	0.0	0.0	0.0	1.7
Salary						
Yes	58.6%	59.3%	73.5%	74.1%	76.0%	70.9%
No	34.5	37.0	24.5	24.1	24.0	26.9
No Response	6.9	3.7	2.0	1.8	0.0	2.1
Working Conditions						
Yes	62.1%	66.7%	69.4%	62.9%	68.0%	66.2%
No	27.6	29.6	24.5	35.2	32.0	31.2
No Response	10.3	3.7	6.1	1.8	0.0	2.7

Table 30

Respondents' Opinions Regarding Continuation of Diploma Program

	1968 (N=29)	1969 (N=27)	1970 (N=49)	1971 (N=54)	1972 (N=75)	Total (N=234)
Opinion						
Strongly Agree	58.6%	92.6%	69.4%	54.8%	72.0%	70.9%
Agree	27.6	7.4	22.4	20.4	24.0	20.9
Disagree	6.9	0.0	4.1	7.4	2.7	4.3
Strongly Disagree	0.0	0.0	2.0	1.8	0.0	.8
No Opinion	0.0	0.0	0.0	1.8	0.0	.4
No Response	6.9	0.0	2.0	3.7	1.3	2.6
Total	100.0	100.0	100.0	100.0	100.0	100.0

Table 31

Reasons Given by Respondents for Continuing or Discontinuing Diploma Programs*

	1968	1969	1970	1971	1972	Total
Reason						
Adequate/Better Preparation	20	21	21	22	22	106
More Clinical Experience	0	0	12	15	37	64
Better Patient Care	2	2	5	11	12	39
Shorter Time Period	2	0	7	2	8	19
Demand for RNs	3	3	3	0	1	10
Need for BSN Degree	2	1	7	3	5	18
BSN not for everyone	0	0	2	5	0	7
Need for Broader Field of Study	1	0	1	5	2	9
Discrimination against RNs	1	0	1	3	2	7
Classes too large	0	0	1	0	0	1
No Response	3	1	2	2	2	10

* Several respondents listed two or more reasons

A FOLLOW-UP STUDY OF THE CLASSES OF 1968-1972: PART II

The aim of the School of Nursing, as stated in its catalog, is to: "...graduate competent and qualified nurse practitioners capable of meeting the nursing needs in the community." To this end, the School undertook a project: "Training for New Roles, Types, or Levels of Nursing Personnel" as part of a Nurse Training Act Grant (#1E 004 NU00714-01).

This project formed the basis for a two-part follow-up study of the graduates of the School of Nursing for the years 1968 through 1972. The purpose of Part I of the follow-up study was to gather data relative to the post-graduation vocational and educational activities and future plans of the graduates. The purpose of Part II of the study was to review the responses obtained in Part I to determine potential implications for the curriculum and to formulate recommendations based upon comments made by the graduates.

Responses were obtained from 82% of the graduates that made up the Classes of 1968 through 1972. The questionnaire, described in the report on Part I, contained a list of 22 nursing functions and two open-ended questions. The ratings of the nursing functions and responses to the open-ended questions provided the information for this report - Part II of the follow-up study.

NURSING FUNCTIONS. The graduates were asked to rate the adequacy of their preparation for 22 nursing functions as 'Excellent', 'Good', 'Fair', or 'Poor'. As reported in Part I of the follow-up study, 80% of the respondents rated the adequacy of their

preparation for these functions as 'Good' or 'Excellent'. For 17 of the 22 functions, the percentage of 'Excellent' ratings was greater than the percentage of 'Fair' ratings (see Table 28, page 22). There were however, five functions for which the percentage of 'Fair' ratings was greater than the percentage of 'Excellent' ratings. These five functions and their ratings are shown in Table 32. Since the school continously strives to provide outstanding nursing education, it was decided to re-examine the 'Fair' ratings by class. Such a re-examination might indicate areas which are currently adequate, but which could become excellent. A Kruskal-Wallis one-way analysis of variance indicated that there was no statistically significant difference in the 'Fair' ratings of these five functions from class to class.

Table 32

Rating of Preparation for
Five Nursing Functions

Function	Rating			
	Excel	Good	Fair	Poor
Using community resources to coordinate long-term patient care	6.8%	30.3%	49.2%	12.0%
Using educational opportunities for professional, personal growth	10.7	50.4	32.0	5.1
Communicating effectively with Doctors	19.2	48.3	26.9	3.0
Communicating effectively with Supervisors	23.1	44.0	25.6	4.7
Participating in analysis, meeting of total health needs of patients	17.9	59.8	19.2	1.7

As may be seen in Table 32, the function: "Utilization of community resources for coordination for long-term patient care" had the highest percentage of 'Fair' ratings.

OPEN-ENDED QUESTIONS. The graduates were asked to respond to the question: "What additional kinds of learning experiences could the School have provided for you?" As might be expected a

Table 33

Additional Learning Experiences Respondents Desired

Learning Desired	Number of Respondents (N=189)
Curriculum	
Increase clinical experience/hours	40
Increase contact with area hospitals and community health agencies	18
More practical knowledge	17
More coordination between theory and clinical practice	13
More team leadership	12
More involvement with patients and families	9
Increase number of seminars and inservice programs	8
More specialization in field (senior year)	7
Increase college courses/hours	6
More experience in laboratory	5
Specific Courses	
Add a Public/Community Health course	83
Improve the Emergency Room/Outpatient course	49
Improve the Intensive Care/Cardiac Care course	19
Improve the Pharmacology course	13
Improve the Operating Room course	10
Improve the Psychiatric Nursing course	6
Increase experience in Dialysis	4

variety of responses were elicited, the majority of which tended to center on the curriculum. The most frequently cited additional experiences were Public/Community Health (83); Emergency Room/ Outpatient Department (49); and Increase in Clinical Experience

Hours (40). The responses were classified under the headings of 1) Curriculum, 2) Specific Courses, and 3) Satisfaction with Education. The kinds of additional learning desired are listed in Table 33 with the number of respondents.

Following are some specific replies included under each category listed in Table 33.

CURRICULUM

Increase clinical experience/hours

"Offer more experience in clinical area."

"More clinical experiences--especially ICU, CCU, Code Blues, IVs."

"Experience in working night shift as a student, so one would be aware of how a patient reacts during the night hours, thus being able to cope with it better as a graduate nurse."

Increase contact with community health agencies

"Utilization of community resources."

"Could have learned more about community resources and some public health."

Practical knowledge

"More practical knowledge--like how to pass medications on twenty patients instead of only two; how to make stubborn IVs run better; how to posey a patient."

More coordination between theory and clinical practice

"More theory in medical surgical nursing and application of this on the floor."

"More discussion and evaluation sessions concerning actual clinical experiences and problems."

More involvement with patients and families

"Dealing with families--facing death with families."

"I think it would have been more useful to have worked more with families of patients. The case study we

did in OB did this, but this is quite different than a patient who has lost a leg or is dying."

Increase number of seminars and inservice programs

"Participation in some of the hospital inservice programs which included the 'employed' staff."

"More seminars on specialized subjects--disease procedures, cardiac care, Code Blue situations."

More specialization in field (senior year)

"I would have liked more OR/ER experience. I feel that during senior experience, a 4 to 6 week period of experience in the area of our choice would have been helpful."

"I feel that a specialty course should be provided--for example, allow the student a choice of cardiac nursing for a couple of months."

Increase college courses/hours

"A program associated with a college or university for a diploma RN to pick up needed credits for a degree without repeating courses; where she could go ahead and continue for a year and have her degree before she starts working."

"More college and longer rotations."

More laboratory experience

"I was not adequately prepared for working closely with the laboratory--collection of specific specimens, evaluation of lab tests, and procedures involved in running those tests."

"I also have found that a more complete knowledge of lab results--as the meaning of various levels of blood gases and their possible effects would have been of great use."

SPECIFIC COURSES

Public/Community Health

"I have become interested in the public health field and wish that there had been more experience in this area. K.C. had public health clinics, Visiting Nurses Association, and other agencies who do have students at times. This is another area of nursing."

"Maybe a few weeks in public health nursing, or nursing in the community. Some nurses might feel very attracted to this field of nursing."

"More exposure to health care outside of the hospital setting. Many patients never see the hospital, and even after major care has been rendered in the hospital, the care doesn't stop with hospital care. (Example: home health nursing clinic, extended care facility, and how and why a certain level of care is provided.)"

"More contact with Kansas City's various health community agencies. Although at the time of my nursing education I did encounter various communities which helped to give me some outlook on what was going on in nursing. I think more nursing geared to health problems and situations outside the hospital should be stressed."

Emergency/Outpatient

"I would have liked to have more outpatient, emergency and disaster experience."

"Night work in the E.R.; several days in the O.P.D."

ICU/CCU

"More learning experience in ICU or caring for an acutely ill patient."

"More extensive coronary care and ICU training."

Pharmacology

"Improved pharmacology with more emphasis on calculated dosages and individualized help in this area."

"The method of teaching pharmacology could be improved. A course solely concerned with pharmacology would be helpful."

SATISFACTION WITH EDUCATION

"I sincerely feel that my training at RHMC was exceptionally well-rounded and supervised. I received learning experiences both within the hospital and outside (i.e. field trips.) I cannot really think of additional learning experiences that could have benefited me any more than those I received during my training. I'm very proud of the pin that I wear on my uniform."

"I thought my training was very adequate. I'm just sorry now that I didn't concentrate even harder than I did. Most aspects were covered and I have come to appreciate all the clinical hours I had."

"RHMC is well-rounded and am very proud of being a graduate from such a fine hospital and school of

nursing. Thank you."

The graduates were also asked to respond to the following question: "What recommendations do you have for the School of Nursing for the future?" As with the preceding question, the responses elicited varied considerably. There were, however,

Table 34

Respondents' Recommendations for the Future

Recommendation	Number of Respondents (N=169)
Curriculum	
Smaller classes	25
Increase clinical experience/hours	19
Increase college courses/hours	11
Increase contact with area hospitals and community health agencies	11
More coordination between theory and clinical practice	7
More involvement with patients and families	7
More specialization in field (senior year)	6
Decrease paperwork	4
More emphasis on clinical grade	4
More team leadership	4
Specific Courses	
Add Public/Community Health course	17
Improve Pharmacology course	17
Improve Intensive/Cardiac Care course	13
Improve Emergency Room/Outpatient course	10
Improve Operating Room course	9
Improve Nutrition/Chemistry course	9
Improve Psychiatric Nursing course	6
Faculty	
Increase teaching effectiveness and increase emphasis in teaching	23
Improve student-faculty relationships	11
General Policies for the Future	
Become a baccalaureate program	11
Keep diploma program	5
Maintain high standards	5

some recommendations that occurred with more frequency than others. The most frequent recommendations made by the respondents included: Smaller classes (25), Increase teaching effectiveness (23), Increase clinical experience/hours (19), Public/ Community Health course (17) and Improve Pharmacology course (17).

The responses were classified under the headings of: 1) Faculty, 2) Curriculum, 3) Specific courses, 4) General Policies for the Future, and 5) Satisfaction with Education. The recommendations are listed in Table 34 with the number of respondents.

Following are some specific replies included under each category listed in Table 34.

FACULTY

Increase teaching effectiveness

"Frequently evaluate the teaching staff and students to insure: 1) a high quality of instruction; 2) proper credit for advancement."

"To have instructors who are tough, but understanding."

Improve student-faculty-administration relationships

"Follow up on complaints voiced."

"Show interest in students; better and more counseling."

"Take more interest in the student as an individual and any problems she may have, i.e. better student-faculty communications."

CURRICULUM

Smaller classes

"From staying at Research and working with the students I feel that there are too many students on the units."

"Smaller clinical classes or more instructors so that more individualized patient care can be given with adequate supervision."

"Don't keep increasing the size of your classes--the smaller the groups working on the units, the more I learned."

Increase clinical experience/hours

"I feel more evenings and night experiences are needed. The routines and actual patient care needs are different."

"Keep the students in the clinical areas as much as possible. Give them as many experiences there as possible. Teach them to handle a substantial patient load."

"More floor experience is also needed; a few hours longer per week would be beneficial. Working a 3-11 shift with more patient responsibility would help students further learning to organize their time."

Coordination between theory and clinical practice

"More application of knowledge clinically."

"More theory and application."

More involvement with patients and families

"Perhaps the school could provide an area of teaching and prevention where the patient can be followed in the hospital and home with a follow-up for prevention rather than symptomatic care. This could invoive the student with a family-centered group rather than an isolated patient."

"I believe that seeing more of a total picture of the patient is necessary."

Specialization in senior year

"They need more specialties as seniors, i.e. cardiology, public health, and leadership."

"If feasible--institute a program of elective experiences in different nursing areas to allow students to pursue aspects of nursing they are particularly interested in."

Decrease paper work

"To give less busy work than we had, and only useful, learning homework."

"Care plans are helpful, but were over-emphasized.

Other devices to help a nurse to think for herself should be used."

"More emphasis on clinical experience and less on unnecessary paperwork."

More emphasis on clinical grade

"I think there should be more care in grading on clinical and theory grading. I found often that a person making A's in theory was given a comparable grade in clinical when performance was not necessarily comparable."

"It might help to have a checklist of treatments and procedures to be accomplished before graduation as when I graduated there were several things I had never done that were expected of me to do."

Team Leading

"I think that students should have some experience either team leading or working evenings; also maybe nights."

"Increase team leading experience and theory; lower ratio of students to instructors."

SPECIFIC COURSES

Public/Community Nursing

"Shorten med-surg training to fit in public health experience."

"More contact with community resources."

Pharmacology

"Develop a more intensive pharmacology course."

"The main areas that I felt could have been improved were team leading and pharmacology. I feel very inadequate in the area of pharmacology, which may be my own fault, but I do think this area could have been presented in a more effective manner."

ICU/CCU

"Increase in clinical time spent in ICU and CCU."

"I'd like to see that the rotation through ICU and evening rotation was continued. I really enjoyed working in both those areas."

Emergency Room/Outpatient

"A rotation for the students through the ER, (especially evenings, 3-11, for 4-6 weeks.)"

"More emphasis on outpatient care and problems considering pre- and post-hospitalization."

Operating Room

"To have an adequate rotation through the OR--nurses need to understand what happens to a patient while in surgery in order to coordinate care and the understanding of why a patient hurts."

"More experience in OR and technical procedures."

Nutrition and Chemistry

"The courses in chemistry and nutrition could be much improved."

"Possibly a different kind of chemistry course would be of more use, one that would count as college credit and be transferable."

Psychiatric Nursing

"More rounded psych than that we received."

"Experience with alcoholic drug abuse patients during our psychiatric training."

GENERAL POLICIES FOR THE FUTURE

Increase college courses/hours

"I think some sort of program to help graduates get their degrees and encourage them to go on would insure a continuing program at RHMC."

"Have the students take more college credits at UMKC so that when they do return to obtain their degrees, it won't be quite as difficult."

Become a baccalaureate program

"I would recommend that the school become a baccalaureate program."

"Be realistic about B.S. versus diploma graduates. The nursing associations are going to demand degrees in a few short years and where will we be? I don't feel I need a degree, but if it's necessary for a job..."

Increase cooperation/contact with area hospitals/agencies

"More contact with community resources."

"More affiliations with other hospitals during the latter part of the junior year, if possible. More contact with community agencies."

Keep diploma program

"I hope Research will keep in there plugging to keep the diploma programs alive. I am very proud to be a graduate. I have found that my education usually surpasses any baccalaureate, associate degree and most other diploma programs as well."

"Please stay open as a three-year program. I really believe that nurses need this experience in the hospital to be knowledgeable and skillful."

Maintain high standards

"Don't let up on your standards. When I was in school I thought the studying and instruction were merciless, but it's nothing to the strains of running a unit and dealing with doctors down to the aides. If you know your nursing, it makes the job a lot easier."

"Keep your standards high."

SATISFACTION WITH EDUCATION

"I had a very good training after seeing some of the other schools. I feel secure both in theory and clinical experience."

"I don't know of any nurses that feel their school prepared them for nursing as well as I feel RHMC did me."

DISCUSSION. There seemed to be little direct relationship between the five Nursing Functions whose 'Excellent' ratings were lower than were the 'Fair' ratings and the responses to the two open-ended questions. The exception appeared to be the function: "Utilization of community resources for coordination of long-term patient care," which will be discussed later.

The 'Fair' rating given the Nursing Function: "Utilizing

educational opportunities for continued personal and professional growth," appeared to be contradicted by the 59% of the respondents who indicated they had investigated the possibility of obtaining a baccalaureate degree and the 38% who indicated they had attended one or more workshops, institutes or non-credit courses since graduation. There is no obvious conclusion to be drawn from what appeared to be contradictory responses. Perhaps the respondents were suggesting that more information be made available to students about the educational opportunities that exist.

The respondents apparently felt a need for improved communication skills as indicated by the 'Fair' ratings they assigned the two nursing functions that related to communicating with doctors and supervisors (See Table 32). The need for improved communication skills cannot be gainsaid, nor is it unique to this group of professionals. There was no obvious explanation for these ratings. To perceive an explanation for the 'Fair' ratings is to understand that the reasons for them are as varied as the respondents' experiences with doctors, supervisors, and others. The modified Junior Year curriculum, implemented during the 1974-1975 school year, includes additional time for the development of communication skills. While the focus of this time is the patient-nurse relationship, it is assumed that the skills taught may be generalized to other relationships or situations.

Some respondents indicated that they felt the School could have provided some additional learning experiences about the use of laboratory results and their relationship to patient care. These comments may provide a partial explanation for the 'Fair' rating given the nursing function: "Participating in the analysis

and meeting of total needs of patients." The tenor of the comments about laboratory experience tended to suggest a slight concern with respect to "...the analysis...of (patient's) needs..." It should be noted that the 'Fair' rating for this function exceeded the 'Excellent' rating by less than two percent.

The three areas most frequently cited by the respondents in which additional learning experiences could have been provided were: Public/Community Health, Emergency Room/Outpatient, and Increased clinical experience/hours. The responses regarding additional learning in Public/Community Health, may, or may not, reflect a desire for a course in Public Health per se, but may be a reflection of the 'Fair' rating given the nursing function: "Utilization of community resources for coordination of long-term patient care."

The Public/Community Health area was the only area which the respondents recommended as an addition to the present curriculum. All other recommendations related to courses/experiences that are part of the curriculum. It should also be noted that the Junior Year curriculum has been modified to include experiences with geriatric facilities, physicians' offices and other community agencies such as the Rehabilitation Center. These latter experiences were implemented during the 1973-1974 and 1974-1975 school years.

The relatively high number of requests for additional learning im Emergency Room/Outpatient and Intensive Care appeared to be disproportionate to the frequency of requests for other kinds of specific courses. It was decided to review the frequency of requests for these experiences by year of graduation to determine

if there was an increase, or decrease, from year to year. The review indicated that the majority of requests were made primarily by members of the Classes of 1968 through 1971 (57 of 68). There was a sharp decrease in the number of respondents requesting additional learning in ER/OPD and ICU from the Class of 1971 (23) to the Class of 1972 (11). This decrease may be partially explained by the addition of the Specialized Care rotation to the Senior Year Curriculum during the 1971-1972 school year.

About one-half of the requests for an increase in clinical experience/hours came from the Class of 1972 (18 of 40). The graduates in the Class of 1972 had been out of school approximately one year when this study was conducted. Their comparatively recent entry into the job market may provide a partial explanation for their requests for additional clinical experience. Another partial explanation for their responses may lie in the rather rapid growth of the School of Nursing. Of the five classes studied, the Class of 1972 was the largest. It was almost one-third larger than the Class of 1971. Thus, the members of the Class of 1972 may have equated the size of their class with a decrease in clinical experience.

The recommendations for the future which the respondents made (See Table 34) tended to overlap the areas in which they felt additional learning experiences could have been provided (See Table 33). The exceptions were those which referred to the facutly and those which were grouped together under the heading: General Policies for the Future. The most frequently mentioned recommendations fell into three broad areas: the curriculum in general, specific courses, and faculty. With respect to the curriculum

in general, the respondents recommended smaller classes and an increase in clinical experience/hours.

The recommendations to decreaae the size of the classes came primarily from the Class of 1968 (6) and the Class of 1972 (8). A partial explanation for this recommendation from the Class of 1972 was previously discussed in relationship to an increase in clinical experience/hours. The responses from the Class of 1968 appeared to have been made by graduates who have been employed at Research Hospital at some time since graduation. They may have perceived the growth of the school as affecting the amount of clinical experience that later classes received.

The recommendations about specific courses tended to parallel the courses in which the respondents indicated that additional learning could have been provided.

The specific courses listed in Tables 33 and 34 are virtually identical, the difference being the frequency associated with a particular course.

The recommendations regarding an increase in teaching effectiveness and emphasis in teaching frequently used the phrase: "more experienced..." It was not possible to determine what kind of "experience" was being stressed by the respondents and thus there was no obvious explanation for the recommendation. Some changes have been made in the structure of the curriculum since most of the respondents graduated. One such change has been previously mentioned, the addition of the Specialized Care segment to the Senior Year. The Junior Year has also been modified, as mentioned earlier. Under the former format of the Junior

Year, the instructor who taught the theory had minimal contact with the students in the clinical area. Under the revised format the instructors teach both nursing theory and its clinical application. It is believed that these changes will place more emphasis on teaching and simultaneously increase teaching effectiveness.

SUMMARY. Part I of the follow-up study gathered data regarding the post-graduation vocational and educational activities and future plans of the members of the Classes of 1968 through 1972. As was reported in Part I, 80% of the graduates rated the adequacy of their preparation as 'Good' or 'Excellent'. The purpose of Part II of the follow-up study was to examine the data obtained in Part I to ascertain potential areas of the curriculum which could be improved upon and develop recommendations based upon suggestions made by the graduates.

The principal findings of Part II of the Follow-up Study were as follows:

- The graduates gave a higher percentage of 'Excellent' rating than 'Fair' rating to 17 of 22 Nursing Functions. The function which received the highest percentage of 'Fair' ratings was: "Utilization of community resources for coordination of long-term patient care."
- The area of Public Health was most frequently cited by the graduates as an area in which additional learning could have been provided. It was also the only recommended addition to the curriculum. The comments regarding Public Health seemed to imply a concern for, and about, community resources.
- The respondents indicated that additional learning experiences could have been provided in a variety of areas indicating: increased clinical experience/ hours; more practical knowledge; and improving some specific courses, e.g. pharmacology.
- Recommendations of the respondents for the future

included: smaller classes; increased clinical experience/hours; improving some specific courses; increase teaching effectiveness; and increasing the number of college courses/hours during the first year in school.

RECOMMENDATIONS. The following recommendations were formulated on the basis of the information provided by the graduates:

- That the Curriculum Committee of the Faculty evaluate the implications of these data in regard to two major areas:

  1. The positive statements made relative to nursing functions, curriculum, specific courses, and satisfaction with education as they relate to the continuance and reinforcement of current practices.

  2. The suggestions included in the sections dealing with nursing functions, curriculum, specific courses, and open-ended questions as they relate to curriculum development, specifically in terms of:

     a. information about resources available in the community for long-term patient care and
     b. amount of clinical experience.

- That the Student Services Committee of the Faculty evaluate the implications of those comments dealing with information about the educational opportunities available to students to determine if a program dealing with this matter is compatible with the role and scope of the Student Services Unit.

APPENDIX

JOHN D. CROUCH
PRESIDENT

JOHN W. BELGER, SR.
VICE PRESIDENT

HENRY NOTTBERG, JR.
SECRETARY

WILLIAM H. REICH
TREASURER

RESEARCH MEDICAL CENTER
2316 East Meyer Boulevard • Kansas City, Missouri 64132 • 816/276-4000

ROBERT E. ADAMS
EXECUTIVE DIRECTOR

The School of Nursing is conducting a follow-up study of the graduates of the Classes of 1968 through 1972.

The purpose of the study is twofold: 1) to collect data relative to the post-graduation professional and educational activities of the graduates, and 2) to apply the findings of the study to strengthen areas of the curriculum.

The degree to which the purpose of the study will be attained is dependent upon your response to the enclosed questionnaire. You can make a significant contribution to the continued growth of the School by completing the questionnaire and returning it as quickly as possible in the enclosed self-addressed, stamped envelope.

All responses to the questionnaire will be kept confidential. No response will be identified by name.

Your cooperation in this study is greatly appreciated by all of us at the School.

Sincerely,

Teresa L. Mitchell

(Mrs.) Teresa L. Mitchell
Director, School of Nursing

Clifford Tatham

Clifford Tatham
Research Projects
Coordinator

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ROBERT E. ADAMS
EXECUTIVE DIRECTOR

About two weeks ago you should have received a questionnaire from the School of Nursing. The questionnaire was mailed to all graduates of the Classes of 1968 through 1972. As yet we have not received your completed questionnaire.

The number of questionnaires returned has been gratifying but is not sufficient for a valid study.

In case you may have misplaced the questionnaire, or did not receive it, a copy is enclosed. Would you take a few minutes now to complete it and return it in the self-addressed, postage-paid envelope.

Since one purpose of this study is to strengthen areas of the curriculum, your response is important.

Would you please return the questionnaire before August 1 to enable us to process the results before school starts in September. Thank you for your help in making this study a success.

Sincerely,

Clifford Tatham
Research Projects Coordinator

P.S. If you've returned the questionnaire--Thanks!
Sorry I 'bugged' you with this letter.

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QUESTIONNAIRE FOR GRADUATES OF
RESEARCH HOSPITAL & MEDICAL CENTER SCHOOL OF NURSING

DIRECTIONS: Most of the questions can be answered by placing a check (✓) in he appropriate place; otherwise, a few words are usually sufficient to answer a question. Please feel free to use additional sheets or the reverse pages of the questionnaire for more detailed comments.

ERSONAL DATA (please print)

A. Name: _____ 6__ 7__ 8__
Last First Middle Maiden (if married)

B. Address: _____ 9__ 10__

C. Marital Status: ___Single ___Married ___Widowed ___Divorced 11__
If married, do you have any children? ___Yes ___No How many?_____ 12__ 13__

D. Spouse's occupation: _____

E. Highest number of years of school spouse completed:
__Less than 8 __8-11 __12 __13 __14 __15 __16 __Over 16 14__

POST-GRADUATION WORK EXPERIENCE

A. Please list those states in which you are licensed as a registered nurse:

1. _____ 3. _____ 15__

2. _____ 4. _____

B. Are you working as a registered nurse? (check only one)
___Yes, full time
___Yes, part time- 1-16 hours per week
___Yes, part time-17-32 hours per week
___Yes, part time-33 or more hours per week
___No

C. If you are at present not working as an R.N. what is your primary reason for not working as an R.N.?
__Family/personal needs __No longer interested in nursing 16__
__Not financially necessary __Cannot obtain desired position or hours
__Earn more at other work __Other (specify)_____ 17__

D. Check the field in which you are now working:
__Medical nursing __General Nursing 20__
__Surgical Nursing __Special Service (specify)_____
__Maternity Nursing __Health field,not nursing:_____
__Pediatric Nursing __Other (specify)_____ 21__
__Psychiatric Nursing __Not Working

E. Check the type of employer for whom you are now working:
__Hospital __School, public/private __Other_____ 22__
__Nursing Home __Public Health Agency __Not Working
__Industry __School of Nursing 23__
__Private Duty __M.D., D.D.S., etc.

F. What type of position do you now hold?
__Staff Nurse __Team Leader __Consultant 24__
__Private Duty Nurse __Instructor: Clinical __Researcher 25__
__Supervisor __Instructor: Classroom __Other_____
__Head Nurse __Administrator __Not Working 26__

G. Please list chronlogically all nursing positions you have held since graduation from R.H.M.C., beginning with the first position after graduation and including your present position.

	Title of Your Position	Full Time	Part Time	Dates of Employment Began	Ended	Employing Institution (optional)	
1.							27
2.							
3.							
4.							

H. Greatest number of promotions within one institution:_____ 28

I. If you have worked as an R.N. during the past year, what was your approximate monthly salary before deductions? 29

__ 0-$200 __ $401-$500 __ $701-$800 __ $1001-$1100
__ $201-$300 __ $501-$600 __ $801-$900 __ $1101-$1200
__ $301-$400 __ $601-$700 __ $901-$1000 __ Over $1200 30

J. Counting both full and part-time work, have there been any periods of time since graduation when you have not been employed as an R.N.? __Yes __No 31
If "Yes", adding them all together, check the total period you were not working as an R.N.: 32

__Less than 5 months __2 years-less than 3
__5 months - 1 year __3 years-less than 4
__Over 1 year-less than 2 __4 years-less than 5

K. What type of position, if any, do you expect to have 10 years from now?

_____

OTHER PROFESSIONAL ACTIVITIES

A. To that organization(s) related to the health field do you belong? 33

__National League for Nursing __R.H.M.C. Alumni Association
__American Nurses Association __Other (specify)_____
__Association of Operating Room Nurses

B. Did you actively participate in the Student Nurse Council while you were in school? ___Yes ___No 34

C. Have you done nursing on a volunteer basis for the Red Cross or similar agencies? __Yes __No If "Yes", about how many hours have you contributed during the past year?_____ 35 36 37

D. In what community activities related to the health field have you engaged during the past year?

_____ 38

_____

E. Have you given any talks or participated on a panel related to the health field during the past year: __Yes __No If "Yes", how many?_____ 39 40

F. Have you written any health articles for publication? __Yes __No 41
If "Yes", how many:_____ In what publications did they appear:

1._____ 3._____

2._____ 4._____

POST-GRADUATION EDUCATION

A. Have you investigated the possibility of obtaining a Baccalaureate Degree? 43__
__Yes __No. If "Yes", at what school?_____ 44__
Did you apply for admission? __Yes __No. Were you accepted? __Yes __No 45__
If you were accepted, how did you get credit for your Diploma Nursing courses? __1. Blanket credit __3. Other_____ 46__
__2. Challenge exams (testing out) __4. No credit given 47__
How many more credit hours were required in: __Nursing __Liberal Arts 49__
If you were not accepted, what were you told you would have to do to gain admission?_____

_____

B. Have you attended any educational program leading to a degree? __Yes __No 51__
If "Yes", do you have a Baccalaureate Degree? __Yes __No __Now attending 52__
Major area: __Nursing __Other (specify)_____ 53__
Do you have a Master's Degree? __Yes __No __Now attending 54__
Major area: __Nursing __Other (specify)_____ 55__
Other college degrees or certificates (describe)_____

C. If you do not have a Baccalaureate Degree:
1. have you experienced difficulty in obtaining a position because you lack the degree? __Yes __No 56__

D. If you have attended workshops, institutes, or courses without college credit, please fill in the following information concerning each, beginning with the first such experience after graduation from R.H.M.C. 57__
Do not include in-service training.

Institution or Sponsoring Agency	Location	Subject	Year	Length	58__

E. In what areas do you feel a need for Continuing Education?

_____

_____

EVALUATION OF THE CURRICULUM

A. At the time of your graduation from R.H.M.C., which of the following positions would you say you were qualified to take? (check all that apply) 59__

__Staff Nurse-hospital
__Head Nurse
__Team Leader
__Public Health Nurse
__Instructor (specify)_____
__Supervisor
__Clinic/Doctor's office
__Other (specify)_____

B. In addition to those checked above, which of the following positions would you say you were qualified to take with experience, but without further educational preparation beyond that obtained at R.H.M.C.? 60__

__Staff Nurse-hospital
__Head Nurse
__Team Leader
__Public Health Nurse
__Instructor (specify)_____
__Supervisor
__Clinic/Doctor's office
__Other (specify)_____

C. How would you rate your preparation for nursing in general as compared to nurses who have been graduated from

1) Other Diploma programs?
__Somewhat above __About the same __Somewhat below 61__

2) Associate Degree programs?
__Somewhat above __About the same __Somewhat below 62__

3) Baccalaureate Degree programs?
__Somewhat above __About the same __Somewhat below 63__

D. Check in the appropriate column to indicate how you would rate the adequacy of your preparation at R.H.M.C. for each of the following functions. Use the followwng code: E--Excellent; G--Good; F--Fair; P--Poor

	E	G	F	P	
Determining the nursing needs of individuals who are at various points on the health-illness continuum.....	___	___	___	___	6__
Determining the nursing needs of individuals of various ages	___	___	___	___	7__
Planning nursing care.....	___	___	___	___	8__
Implementing a nursing care plan.....	___	___	___	___	9__
Evaluating nursing care given by self or others.....	___	___	___	___	10__
Carrying out nursing procedures by utilizing technical skills.....	___	___	___	___	11__
Recognizing and meeting psychological needs.....	___	___	___	___	12__
Patient and family teaching.....	___	___	___	___	13__
Observing, recording, and reporting pertinent signs and symptoms.....	___	___	___	___	14__
Making decisions concerning nursing care based upon scientific principles.....	___	___	___	___	15__
Communicating effectively with					
1) patients and families.....	___	___	___	___	16__
2) health team members.....	___	___	___	___	17__
3) Supervisor.....	___	___	___	___	18__
4) Doctors.....	___	___	___	___	19__
Participating in the analysis and meeting of total health needs of patients.....	___	___	___	___	20__
Assisting the patient with the medical regimen for treatment.....	___	___	___	___	21__
Coordinating the work of, and giving guidance to, other nursing team members.....	___	___	___	___	22__
Working effectively with others.....	___	___	___	___	23__
Utilizing educational opportunities for continued personal and professional growth.....	___	___	___	___	24__
Assuming responsibility for decisions and actions as a professional person.....	___	___	___	___	25__
Utilization of community resources for coordination of long-term patient care.....	___	___	___	___	26__
Developing your own philosophy of nursing.....	___	___	___	___	27__

E Did you feel adequately prepared for your State Board Exams? __Yes __No 28__

F. Did you wish to be employed by R.H.M.C. when you graduated? __Yes __No 29__
If "Yes", for what position did you apply?_____
Was the position available for you? __Yes __No 30__
Were you told you could start elsewhere and be transferred to the desired department when an opening was available? ___Yes __No 31__
If "Yes", were you subsequently transferred? ___Yes __No 32__

G. Has your work in nursing met your expectations in terms of:
Personal satisfaction __Yes __No __I cannot answer these questions
Salary __Yes __No or __because I have never worked as 33__
Working conditions __Yes __No an R. N. 34__

. Which of the following statements most nearly describes your opinion on the controversial issue regarding continuing or discontinuing Diploma programs in nursing? 35

___Strongly Agree that Diploma programs should be continued.
___Agree that Diploma programs should be continued.
___Disagree that Diploma programs should be continued.
___Strongly Disagree that Diploma programs should be continued.
___No opinion.

Please explain your response to the above question:

I. What additional kinds of learning experiences could the School have provided for you?

J. What recommendations do you have for the School of Nursing for the future?

K. What can the School do for you as an Alumnus?